IN THE UNITED STATES PATENT AND TRADEMARK OFFICE **UTILITY PATENT APPLICATION TRANSMITTAL**

ET NAMED INVENTOR OR APPLICATION IDENTIFIER: Michael E. Leckron et al. #### METHOD AND APPARATUS FOR PROVIDING INTRA-PERICARDIAL ACCESS

CERTIFICATE UNDER 37 CFR §1.10: I hereby certify that this Utility Patent Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service, in an envelop addressed to: Mail Stop Patent Application, Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450, N

"EXPRESS No. EV 331 792 634 US, on this _______ day of ______ day of ______ Sue McCov Printed Name

MAIL STOP PATENT APPLICATION Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

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Sir:							
We are	transmitt	ng herewith the attached:					
X	Patent Application Transmittal						
X	Specific	Specification:					
X	Drawing	Total pages: 30 (including claims and abstract: Spec. 18 sheets; Claims 11 sheets; Abstract 1 ngs:					
		Total sheets:15_					
⊠	C mbin	executed copy from prior application Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b) Incorporation by Reference - The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.					
x	Accomp	mpanying application parts: Notification of filing a Assignment of the Invention to Medtronic, Inc. Assignment cover sheet Information Disclosure Statement PTO Form 1449 Copies of IDS citations Preliminary Amendment A copy of the Petition or Conditional Petition for Extension of Time in the prior application. Return Postcard					
IF A CO	NTINUIN	G APPLICATION:					
		Continuation					
	\boxtimes	Amend the specification by inserting before the first line the sentence:This application is a divisional of application Serial No. 09/430,096, filed October 29, 1999, now allowed					
	\boxtimes	Cancel in this application original claims $\underline{1-38}$ of the prior application before calculating the filing fee. (At least the original independent claim must be retained for filing purposes.)					
	\boxtimes	The prior application is assigned of record to Medtronic, Inc.					
	The Power of Atterney in the price application is to : Girma Wolde-Michael.						

	This application claims the benefit of U.S. Provisional Application(s) Serial No.(s), filed							
X	Address all future correspondence to:	Elisabeth L. Belden, Reg. No. 50,751 Telephone: (763) 514-4083 Facsimile: (763) 505-2530						



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FEE CALCULATION	No. of Claims Filed	Claims Included in Base Fee		No. of Extra Claims	Rate	Fee
Total Claims	2	20	=	0	x 18	0
Independent Claims	2	3	=	0	x 84	0
Multiple Dependent Claims	0			0	+ 280	0
Basic Filing Fee						\$750.00
					TOTAL	750.00

- Charge Deposit Account No. 13-2546 in the amount of **\$750.00** for the filing fee.
- X The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546. A duplicate of this transmittal is enclosed.

June 26, 2003

X

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